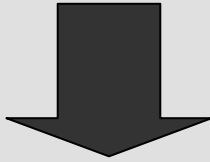


LRA Form 7.23
Labour Relations Act, 1995
S 135 (2A)

**APPLICATION FOR
EXTENSION OF THE
CONCILIATION PERIOD**



Read This First



**WHAT IS THE PURPOSE OF THIS
FORM?**

This form is intended to request extension of the 30 day conciliation period.

WHO MAY APPLY FOR EXTENSION:

The Commissioner or any of the parties to the dispute may request the Director to extend the conciliation period where it is believed that there are prospects of reaching a settlement.

FURTHER INFORMATION

This Application must be served on all relevant parties.

No objection to the application will be considered. The extension is considered on the basis of the information provided by the applicant.

Supporting documents may be attached to this form.

The application may only be made where the parties can't agree to an extension and the refusal to agree is considered unreasonable.

The Extension sought shall not exceed 5 days.

The Extension cannot be granted where the employer party is the state.

All the information required in this form must be completed.

Case Number:

Employee Party:

Employer Party:

Nature of dispute:

Date of referral

Date of Conciliation:

Number of days extension required:

Has the other party refused to extend the conciliation period: Yes No

If no, give reasons why the refusal is considered unreasonable

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Are there prospects of reaching a settlement if the conciliation is extended Yes No

If yes, provide reasons,

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Provide any other submissions that may be relevant to the request for extension.

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Applicant:

Signature of requesting party:

Date of Request:

PART B: DIRECTOR'S DECISION

Application granted

Number of days for which the conciliation is extended

Reasons and/ or Conditions attached to the extension:

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Application rejected

Reasons for rejections:

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.....
DIRECTOR / DELEGATE

.....
Date



**COMMISSION FOR CONCILIATION,
MEDIATION & ARBITRATION**

TO THE CCMA

PROTECTION OF PERSONAL INFORMATION ACT, 4 OF 2013

By signing this referral form, I/we hereby grant my/our voluntary consent that my/our personal information may be processed, collected, used and disclosed in compliance with the Protection of Personal Information Act, 4 of 2013. I/we furthermore agree that my/our personal information may be used for the lawful and reasonable purposes in as far as the CCMA (responsible party) must use my/our information in the performance of its public legal duty. I/we understand that my/our personal information may be disclosed to a third party in as far as the CCMA must fulfil its public legal duty. I/we furthermore understand that there are instances in terms of abovementioned Act where my express consent is not necessary to permit the processing of personal information, which may be related to litigation or when the information is publicly available. Further details are available on the CCMA website.

SIGNED AT _____ **ON THIS** _____ **DAY OF** _____ **202**__

INITIAL AND SURNAME: _____

SIGNATURE: _____